

**NJ DIVISION OF PENSIONS AND BENEFITS AND
NJ DIVISION OF THE DEAF AND HARD OF HEARING
REGISTRATION FORM**

<p>Questions? Division of Pensions and Benefits Nikki Kowalski</p> <p>E-mail: Nichole.Kowalski@treas.state.nj.us (609) 777-2111</p>	<p>REGISTRATION DEADLINE: AUGUST 31, 2006 Registration is Easy! www.state.nj.us/treasury/pensions/sp0755.pdf Print — Complete — Fax (609) 292-9500</p>	<p>Return Form To: Division of Pensions and Benefits ATTN: Nikki Kowalski Benefits Education PO Box 295 Trenton, NJ 08625-0295</p>
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INSTRUCTIONS: This form is for use by public employers/employees when enrolling in this specific course presented by the Division of Pensions and Benefits and the Division of the Deaf and Hard of Hearing. State agencies with access to electronic registration **MUST** use the STADIS system. Other locations must use this registration form. Before completing, please read the information provided on the back of this form. Complete one form per course, per person. Mail or fax completed registrations to the Division of Pensions and Benefits, Benefits Education (see above for address).

PLEASE TYPE OR PRINT CLEARLY WHEN COMPLETING THIS FORM.
LUNCH WILL NOT BE PROVIDED. PLEASE BRING YOUR OWN LUNCH.

COURSE INFORMATION

Course Title: **NJ Pensions and Benefits Retirement Planning for People with Hearing Loss**

<p><i>Course Date:</i> 10/2/06 Time: 9 AM to 4 PM</p>	<p><i>Course Number:</i> GG.929.270048</p>	<p><i>Course Location:</i> NJ Library for the Blind and Handicapped 2300 Stuyvesant Avenue, Trenton, NJ</p>
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WORK INFORMATION

Your Organization:	
Mailing Address	

PARTICIPANT INFORMATION

Last Name, First, MI:	
Daytime Phone:	Home Address:

ACCESSIBILITY INFORMATION

Type of Hearing Loss:	<input type="checkbox"/> Deaf	<input type="checkbox"/> Deaf-Blind	<input type="checkbox"/> Late-Deafened	<input type="checkbox"/> Hard of Hearing
Assistance needed:	<input type="checkbox"/> CART	<input type="checkbox"/> Jordy	<input type="checkbox"/> Sign Language Interpreter	
	<input type="checkbox"/> Tactile Interpreter	<input type="checkbox"/> Assistive Listening Device (FM, Loop)	<input type="checkbox"/> Oral Interpreter	
	<input type="checkbox"/> Other:			

SOCIAL SECURITY NUMBER PRIVACY STATEMENT — Participant data, including Social Security Number, is requested in order to identify participants accurately for registration into the Division of Pension and Benefits courses, to confirm registration, and to produce staff development records. Any other use of this information and any release outside the Division of Pension and Benefits and the customer organization are prohibited. Authority to collect this data is pursuant to NJSA 11A:6-25 and NJAC 4A:6-4.2(e). The provision of the information is voluntary on the part of the participant.

INSTRUCTIONS

Use this form to register for Division of Pension and Benefit's course, "NJ Pensions and Benefits Retirement Planning for People with Hearing Loss". This registration must be completed and forwarded to the Division of Pensions and Benefits, ATTN: Nikki Kowalski, Benefits Education, PO Box 295, Trenton, NJ 08625-0295. You may fax (609) 292-9500 or e-mail: Nichole.Kowalski@treas.state.nj.us.

Complete this form as follows:

Course Information: The specific course information is already indicated on the front of this form.

Work Information: Please enter the full mailing address of your employer, including the ZIP Code and, if applicable, PO box.

Participant Information: Enter the name of the individual requesting to attend the course. Provide the Social Security number, work phone number, and full home mailing address. Confirmations and directions will be mailed to this address. Please indicate if you are Deaf, Deaf-Blind, Late-Deafened, or Hard of Hearing. Also indicate what access accommodation you would like to have.

Local Employers and Other Government Agencies: Use this form to register for the Division of Pensions and Benefits course that is listed on the front of this form. This registration form must be completed and forwarded to the Division of Pensions and Benefits, ATTN: Nikki Kowalski, Benefits Education, PO Box 295, Trenton, NJ 08625-0295. You may fax the completed form to (609) 292-9500 or e-mail: Nichole.Kowalski@treas.state.nj.us.

State Agencies: State agencies with access to electronic registration MUST use the STADIS system. Follow the normal training request procedures through your training coordinator. If you are employed by a State agency that does not have electronic registration access, this registration form may be completed and forwarded to the Division of Pensions and Benefits, ATTN: Nikki Kowalski, Benefits Education, PO Box 295, Trenton, NJ 08625-0295. You may fax the completed form to (609) 292-9500 or e-mail: Nichole.Kowalski@treas.state.nj.us.

CONFIRMATION

Upon acceptance of your registration, a letter of acknowledgment and directions to the seminar site will be sent to the home address that you have indicated on the front of this registration form. Any changes to the course, such as date, location, or time will be indicated in your letter. This confirmation and directions are sent from the Department of Personnel/HRDI. However, if you do not receive them timely, please contact the Division of Pensions and Benefits, ATTN: Nikki Kowalski, Benefits Education, PO Box 295, Trenton, NJ 08625-0295. You may also send a fax to (609) 292-9500 or e-mail: Nichole.Kowalski@treas.state.nj.us. We will verify your registration and provide you with directions to the seminar.

CANCELATION, TRANSFER/RESCHEDULE, SUBSTITUTION

If you cannot attend a class that you have registered for, contact the Benefits Education office. Withdrawal and course transfer requests must include the name and number of the class, your name and address, and a phone number where you can be reached during the day. For more information contact the Division of Pensions and Benefits, ATTN: Nikki Kowalski, Benefits Education, PO Box 295, Trenton, NJ 08625-0295. You may also send a fax to (609) 292-9500 or e-mail: Nichole.Kowalski@treas.state.nj.us.

ACCESSIBILITY SERVICES



The Joryd will be available during the workshop if requested in advance.



ALD's (Assistive Listening Devices) will be available during the workshop if requested in advance.



CART / C-Print will be available during the workshop if requested in advance.



Sign Language Interpreters and/or Tactile Interpreters and/or Oral Interpreters will be available during the workshop if requested in advance.